UNITED STATES Mail Progessing Securities and exchange commission Section Washington, D.C. 20549

SEC 152000

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Washington, DC UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL								
OMB Number:								
SEC USE ONLY								
Prefix	Serial							
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DATE RECEIVED								
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332459

Name of Offering (check if this is an a		•	ndicate change.)		
Offering of limited partnership interests of	K2 Long Short Maste	er Fund, LP			
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Section 400	OCESSED.
Type of Filing: New Filing				r n	
	A. BASI	C IDENTIFICAT	ION DATA	S	EP 1 8 2008
Enter the information requested about the	issuer			THO	VISON REUTERS
Name of Issuer	nendment and name I	nas changed, and in	dicate change.	THO	VIOCIA KEDIEKO
K2 Long Short Master Fund, LP			•		
Address of Executive Offices:		(Number and Stre	et, City, State, Zip Co	ode) Telephone N	lumber (Including Area Code)
c/o K2 Advisors, L.L.C., 300 Atlantic Street,	12 th Floor, Stamford	l, Connecticut 069	01		(203)905.5358
Address of Principal Offices		(Number and Stre	et, City, State, Zip Co	ode) Telephone N	lumber (Including Area Code)
(if different from Executive Offices)					
Brief Description of Business: Private Inv	estment Company				
Type of Business Organization		-			
☐ corporation	Iimited	partnership, already	formed	other (pleasu	08061103
□ business trust	☐ limited	partnership, to be fo	med		00001100
		Month	Yea	r	
Actual or Estimated Date of Incorporation or O	rganization:	0 3	0	3 ⊠ Ac	ctual
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. I	Postal Service Abbr	eviation for State:	'	
			or other foreign jurisd	iction)	E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg, or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5-05) DC-1239715 v1 0307425-00023

		A. BASIC II	DENTIFICATION DAT	A	
Each beneficial owr Each executive office	ne issuer, if the iss ner having the pov cer and director of	uer has been organized wi ver to vote or dispose, or di			a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, i	f individual): K2	Advisors, L.L.C			
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 300 Atlantic Street, 12	th Floor, Stamfore	d, Connecticut 06901
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): Do u	glass III, William A.			
Business or Residence Add	-	•	de): c/o K2 Advisors, L.L.C	.	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, i	f individual): Sau	nders, David C.			
Business or Residence Add	-	•	de): c/o K2 Advisors, L.L.C		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual): Joh	n T. Ferguson			
Business or Residence Adda 300 Atlantic Street, 12 th Flo	-	•	de): c/o K2 Advisors, L.L.C	-	
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): K2 l	ong Short Fund, LLC			
Business or Residence Addr			de): c/o K2 Advisors, L.L.C	2.	
300 Atlantic Street, 12th Flo Check Box(es) that Apply:			☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): K2	Overseas Long Short Fur	nd I, Ltd.		
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de): c/o Maples Finance B	Vi Limited, Kings	ton Chambers, P.O. Box 173, BVI
Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): K2 /	Advisors Kosciusko Long	Short Fund, Ltd.		
Business or Residence Addr			de): c/o K2 Advisors, L.L.C).	
300 Atlantic Street, 12 th Flo Check Box(es) that Apply:	or, Stamford, Co ☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFORM	MATION	ABOUT	OFFER	ING			
1.	Has the issue	er sold, or	does the is	suer inten			edited inve				*********	☐ Yes	⊠ No
2.	What is the n	ninimum in	vestment f	that will be	accepted	from any i	ndividual?					\$1,	°000,000
3.	Does the offe		-	•	-							Yes	□No
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
Full	Name (Last n	ame first, i	f individual	1)	·								
Busi	ness or Resid	ence Addr	ess (Numb	per and Str	reet, City,	State, Zip	Code)						
Nam	e of Associate	ed Broker	or Dealer	<u>-</u>									
State	s in Which P (Check "All S												☐ All States
□ (<i>t</i>					[CO]					☐ [GA]	☐ [Hi]	[ID]	All Oldico
()	_] [IN]	□ [IA]	[KS]	□ [KY]	☐ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
M) [NE] [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	□ [OH]	□ (OK)	□ [OR]	□ [PA]	
[F	ii] [sc]	☐ (SD)	□ [TN]	□ [ТХ]			□ [VA]	□ [WA]	[WV]	[WI]		☐ [PR]	
Full I	Name (Last na	ame first, it	f individual)									
Busi	ness or Resid	ence Addr	ess (Numt	per and Str	reet, City,	State, Zip	Code)						
Nam	e of Associate	ed Broker o	or Dealer										
	s in Which Pe (Check "All S												☐ All States
(/					[CO]			☐ [DC]	[FL]	□ [GA]	☐ [HI]	□ (ID)	
□ (II	.] 🔲 [IN]	[IA]	☐ (KS)	☐ [KY]	□ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	☐ [MI]	☐ [MN]	☐ (MS)	[MO]	
□ [N		□ [NV]	□ [NH]	[NJ]	□ [NM]	□ [NY]		□ [ND]	□ [OH]			☐ [PA]	
☐ [F		☐ [SD]		[X1]		□ (\(\nabla\)\)	□ [VA]	[AW]	□ [WV]	□ [Wi]	[WY]	☐ [PR]	
Full f	lame (Last na	ame first, if	individual)									
Busii	ess or Resid	ence Addr	ess (Numb	per and Str	eet, City, S	State, Zip (Code)					<u> </u>	
Nam	e of Associate	ed Broker o	or Dealer										
State	s in Which Po (Check "All S	tates" or cl	heck indivi	dual State	s)								☐ All States
				_			_		_	☐ [GA]	_ · ·	[ID]	
		[IA]		[KY]			[MD]						
(N				[N]							[OR]		
(F		[SD]			nk sheet, o		[VA]				(WY)		
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Aiready Sold
	Debt	. \$	0	\$	0
	Equity	. \$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	. <u>\$</u>	0	\$	0
	Partnership Interests	<u>\$</u>	900,000,000	\$	544,072,415
	Other (Specify)	\$		\$	
	Total	\$	900,000,000	\$	544,072,415
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number		Aggregate Dollar Amount
			Investors		of Purchases
	Accredited Investors	٠	5	\$	544,072,415
	Non-accredited Investors		n/a	\$	n/a
	Total (for filings under Rule 504 only)	·	0	\$	0
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		n/a	\$	n/a
	Regulation A		n/a	\$	n/a
	Rule 504	· ——	n/a	\$	n/a
	Total		n/a	\$	n/a
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-			
	Transfer Agent's Fees	••••••	🗆	\$	0
	Printing and Engraving Costs	•••••	🛘	<u>\$</u>	0
	Legal Fees	•••••	🛛	\$	54,497
	Accounting Fees	•••••	🗆	\$	0
	Engineering Fees	•••••	🗆	\$	0
	Sales Commissions (specify finders' fees separately)		🗆	\$	0
	Other Expenses (identify)			\$	0
	Total		🛛	\$	54,497

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	S AND USE OF F	ROCEEDS	<u>. </u>
4	b. Enter the difference between the aggregate offering price given in response to Part C–Question 1 and total expenses furnished in response to Part C–Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	he	<u>.\$</u>	899,945,503
5	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equa the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b. above.	Payments (Officers, Directors & Affiliates	ķ	Payments to Others
	Salaries and fees	\$	🗆	\$
	Purchase of real estate	\$	🗆	\$
	Purchase, rental or leasing and installation of machinery and equipment	\$	□	<u>\$</u>
	Construction or leasing of plant buildings and facilities	\$	□	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger	\$		\$
	Repayment of indebtedness	\$	🗆	\$
	Working capital	\$	🛛	\$ 899,945,593
	Other (specify):	\$	🗆	\$
		\$	🗆	\$
	Column Totals	<u>\$</u>		\$899,945,503
	Total payments Listed (column totals added)	⊠	\$ 899,9	45,503_
_	D. FEDERAL SIGNATURE			
CO	his issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this issuer has an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502	is notice is filed unde upon written request	r Rule 505, the of its staff, the	e following signature e information furnished
	Suer (Print or Type) K2 Long Short Master Fund, LP		Date: Sept	ember 15, 2008
	ame of Signer (Print or Type) Title of Signer (Print or Type) The Operating Officer #2 Advisors	s, L.L.C., its General	Partner	

ATTENTION

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?	esently subject to any of the disqualification	Yes No
	See	Appendix, Column 5, for state response.	
2	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required to	o furnish to any state administrator of any state in which this no by state law.	otice is filed a notice on Form D
3.	The undersigned issuer hereby undertakes to	furnish to the state administrators, upon written request, infor	mation furnished by the issuer to offerees.
4.	The undersigned issuer represents that the is Exemption (ULOE) of the state in which this no of establishing that these conditions have been	suer is familiar with the conditions that must be satisfied to be notice is filed and understands that the issuer claiming the ava en satisfied.	entitled to the Uniform limited Offering ilability of this exemption has the burden
	suer has read this notification and knows the con ized person.	tents to be true and has duly caused this notice to be signed of	on its behalf by the undersigned duly
Issuer	(Print or Type)	Signature	Date
K2 Lo	ng Short Master Fund, LP	Van de	September 15, 2008
Name	of Signer (Print or Type)	Title of Signer (Print or Type)	
John T. Ferguson		Chief Operating Officer, K2 Advisors, L.L.C., its Ge	neral Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX					
1	-	2	3			4		5		
÷	to non-adinvestors	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
СО										
СТ		Х	\$500,000,000	2	\$175,075,075	0	\$0		х	
DE										
DC										
FL		:								
GA										
HI										
ID								<u> </u>		
IL								<u> </u>		
IN										
IA										
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KY										
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NV								<u> </u>		
NH										
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NM									<u> </u>	

				AP	PENDIX				:
1		2	3			4		5	
٠	to non-a investor:	I to sell ccredited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NY									
NC									
ND									
ОН									
ОК									
OR									
PA				·					
RI									
sc									
SD									
TN									
TX									
UT								<u> </u>	
VT									
VA									
WA									
wv									
WI									
WY									
Non		х	\$500,000,000	3	\$368,997,340	0	\$0		х

